FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V03707

(9)

J. BRAV	O ENGINEERING AND	CONSULTING, INC.		1401 8181 8860 1111 8001 8014 80	
Principal Place	e of Business	Mailing Address	·	{	0161 0161 Distriction 0161 0161 0161
P.O. BOX 187 P.O. BOX 187 PANAMA CITY FL 32401 PANAMA CITY F		P.O. BOX 187 PANAMA CITY FL 32401			
				3. Date Incorporated or Qualified 01/02/1992	3a. Date of Last Report 05/01/1996
L '	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 Suite Apt	# etc	26 Suite, Apt. #, etc.	······································	59-3178575	Not Applicable \$8.75 Additional
22		27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	0	City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	28 Zip	Country	Trust Fund Contribution	Added to Fees
24 324			30	8. This corporation has liability for Florida Statutes	Yes X No
	9. Name and Address of	Current Registered Agent		10. Name and Address of New R	
BRA	VO, JOHN E		81 Name		
125 HAMILTON AVE			82 Street Addr	ess (P.O. Box Number is Not Accepta	ble)
PAN	AMA CITY FL 32401		83		
			84 City		FL 85 Zip Code
11. Pursuant	to the provisions of Sections (07.0502 and 607.1508, Florida Statutes	s, the above-named corp	poration submits this statement for the	
office or r agent 1 a	egistered agent, or both, in the m familiar with, and accept the	207.0502 and 607.1508, Florida Statutes le State of Florida. Such change was au e obligations of, Section 607.0505, Flori	ithorized by the corporational	ion's board of directors. I hereby acce	pt the appointment as registered
SIGNATURE	, , , , , , , , , , , , , , , , , , , ,				
	Signarize typed or printed name of regr		Registered Agent signature requir	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	DATE
12.	PST	RS AND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFI	CEHS AND DIRECTORS IN 12 Addition
NAME	BRAVO, JOHN E.		1.2 NAME		
STREET ADDRESS	125 HAMILTON AVENUE		1.3 STREET ADDRESS		
CITY-S1-ZIP	PANAMA CITY FL		1.4 CITY - ST - ZIP		
MILE		☐ DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		
STHEET ADDRESS			2 3 STREET ADDRESS		
City-St-7iP Title		DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE	······································	Change Addition
NAMÉ		C) Steele	3.2 NAME		Onlinge Flooring
STREET ADDRESS			3 3 STREET ADORESS		
CITY-\$1-ZIP			3 4. City-St-ZiP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAMÉ			4. 2 NAME		
STREET ADORESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		T. October	4.4 CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	T Observe T LARGE
TITLE		DELETE	5.1 TITLE		Change Addition
NAME CTOSES ADSOCCE			5.2 NAME		
STREET ADDRESS CITY - ST - ZIP			5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME.			6.2 NAME		
STREET ADDRESS			63 STREET ADDRESS		
CITY-ST-7/P			6.4 City - ST - ZIP		_
14. I do here	by certify that the information	supplied with this filing does not qualify port or supplemental annual report is tru	for the exemption stated	d in Section 119.07(3)(i), Florida Statut	es. I further certify that the
Lam an o	thicer or director of the corpor	ation or supplemental annual report is tru ation or the receiver or trustee empowe	red to execute this repor	rt as required by Chapter 607, Florida	Statutes; and that my name

SIGNATURE:

appears in Block 12 or Block 13

THE SHAP PRINTED HANDONE DINNER OF DEER OR DIRECTOR

April 14, 1997

904-764-2856

A4464

Secretary of State

FILED

May 08 1997 8:00am